



Political Action Committee Statement of Non-Receipt of Contributions and Non-Expenditure of Funds

For Political Action Committees that have not spent or received any campaign funds

Name of Organization				Phone Number	
Mountainstar Healthcare Good Government					
Street Address	Suite/Apartment/PO Box:	City	State	Zip	
6985 Union Park Center	500	Cottonwood Heights	UT	84047	
Also known as					

No Contributions & Expenditures

Type of Report (Check the appropriate box)	
INTERIM REPORTS:	YEAR-END REPORT:
<input type="checkbox"/> August 31st	<input checked="" type="checkbox"/> January 10th of every year
<input type="checkbox"/> Seven days before a General Election	
<div><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</div> Is this report an amendment?	

Report Verification
I, <u>Jody S. Dial</u>
Print Name of Treasurer or Financial Officer
affirm that I have received no Contributions and incurred no expenditures for political purposes during this reporting period.
<u>Jody S. Dial</u>
Signature of Treasurer or Financial Officer
<u>1/07/2009</u>
Date

To File this Form Mail or deliver to Lieutenant Governor's Office Utah State Capitol, Suite 220 Salt Lake City, UT 84114-2325 (801) 538 - 1133 For More Information Contact the Lieutenant Governor's Office (801) 538 - 1041 1-800-995-VOTE(8683) elections@utah.gov

For Office Use Only
<input checked="" type="checkbox"/> Entered _____
<input type="checkbox"/> Copied _____
Date Received _____